

NASSAU COUNTY DEPARTMENT OF ASSESSMENT 240 OLD COUNTRY ROAD, 4TH FLOOR MINEOLA, NY 11501 ATTN: ASIE COMPLIANCE

ASIE-2005
ASSISTED LIVING
ANNUAL SURVEY
OF INCOME AND
EXPENSE

P	PROPERTY IDENTIFICATION													
LIST ONLY THE PRIMARY SECTION, BLOCK & LOT														
	SECTION BLOCK LOT													
1														
2	PROPERTY ADDRESS													
	IFROFER I ADDRESS													
	YOU MAY CONSOLIDATE YOUR FILING FOR CONTIGUOUS DOES THIS SUBMISSION INCLUDE MORE THAN ONE TAX LOT?										OT?			
	PROPERTIES THAT ARE COMMONLY OWNED AND OPERATED CHECK YES □ OR NO □													
	CHECK IF RELEVANT ALL LOTS ARE CONTIGUOUS IF YES, INDICATE THE NUMBER OF TAX LOTS													
		ADDITIONAL LOTS ARE LISTED ON AN ATTACHED SHEET AND LIST THEM BELOW												
	□ ALL LO	TS ARE OPE	ERA	TED AS	AN ECONOI	MIC UN	IT				\			
	SECTION		E	BLOCK		LOT		SECTION			BLOCK		LOT	
	SECTION		E	BLOCK		LOT		SECTION			BLOCK		LOT	
	SECTION		E	BLOCK		LOT		SECTION			BLOCK		LOT	
30	ONTAC1	INFORM	MΑ	TION										
1	OWNED OD	ODEDATORI	- N	A N 4 E	- OVA	/NED		ATOR		ORGANIZATION				
	OWNER OR	OPERATOR'S	S IN	AIVIE	□ OW	INEK	□ OPER	ATOR						
4									5					
	CONTACT F	PERSON								CONTACT PERS	SON'S REL	ATIONSHIP T	o prope	RTY
6	CONTACT'S	DAYTIME TE	I FP	HONE					7	E-MAIL ADDRES	28			
	OONTAGE	DATTIME IE		TIONE						E-WAIE ADDITEO	,0			
8									9					
) F	ROPERI	TY DESC	RI	PTION	AND US	SE								
i	10. 2. 1.	. 5266	· ``	.						ı		I		
	TOTAL NUMBER OF NUMBER OF STORIES TOTAL GROS									ASSISTED LIVING VACANCY IN 2005				
	BUIL	DINGS		MA	IN BUILDING		ALL B	LDGS		OR ACREA	±E	VACA	NCY IN 2	:005
0			11			12			13		14			%
NAME OF ASSISTED LIVING FACILITY -														
	TOTAL N	UMBER OF		TOTAL N	IUMBER SHAF	RED	TOTAL NU	MBER OF		TOTAL NUMBE	R OF	TOTAL	NUMBE	R OF
	RESI	DENTS		ROOM	IS OR SUITES	3	STUI	DIOS		1-BEDROOM	vis	2-B	EDROOM	IS
16			17			18			19		20			
						=					•			
LIST OTHER COMMERCIAL TENANTS BY NAME AND PREDOMINANT USE. FILERS MAY ATTACH A COMPUTERIZED LISTING OR RENT ROLL.														
21														
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ASSISTED LIVING ASIE, PAGE 1

PARKING											
DOES THIS SUBMISSION INCLUDE PARKING YES D NO D IF YES, LIST BELOW											
OUTDOOR PARKING		INDOOR PARKING									
TOTAL NUMBER OF SPACES		TOTAL NUMBER OF SPACES									
TOTAL NUMBER OF SPACES		TOTAL NOWIBLE OF	SPACES								
NUMBER OF PAID SPACES (IF ANY)		NUMBER OF PAID SP	PACES (IF ANY)								
MONTHLY RATE	\$	MONTHLY RATE		\$							
S PARKING SHARED BY OTHER PROPERTIES? YES IF YES, LIST THEM HERE -											
PODEDTY I FASE INFORMATION											
PROPERTY LEASE INFORMATION IS THE PROPERTY LEASED BETWEEN RELATED	PARTIES? THIS	IO THIS PROPERTY OUR	JEGT TO A NET LEAGES VES	NO 🗆							
INCLUDES PARTIES THAT ARE RELATED THROUGH MARRIAGE AND BUSINESS ENTITIES UNDER COM	GH BLOOD OR	IF YES, CHECK APPROP	JECT TO A NET LEASE? YES ☐ RIATE BOX BELOW	NO ⊔							
YES NO	MARRIAGE AND BUSINESS ENTITIES UNDER COMMON CONTROL.										
☐ NET LEASE - A LEASE REQUIRING THE TENAM	IT TO PAY. IN ADDI	TION TO A FIXED RENTAL	MANY OF THE EXPENSES FOR TH	E OPERATION							
OF THE PROPERTY - INDICATE THE NET LEASE APPROPRIATE SECTIONS ON THE DEPARTMENT	AMOUNT IN THE S	PACE PROVIDED HERE	\$ <u> </u>	AND IN THE							
APPROPRIATE SECTIONS ON THE DEPARTMENT ANY EXPENSES YOU ARE RESPONSIBLE FOR IN EXPENSE FORMS.											
EXPENSE FORMS.											
TRIPLE NET LEASE - A LEASE WHICH OBLIGATES THE TENANT TO PAY ALL OF THE EXPENSES OF THE LEASED PROPERTY, SUCH AS TAXES, INSURANCE, MAINTENANCE, UTILITIES, ETC. INDICATE THE TRIPLE NET LEASE AMOUNT IN THE SPACE PROVIDED HERE											
	D IN THE APPROPE	ATE SPACE ON THE INCOME AND EXPENSE FORM. PLEASE REFER TO									
	THE INCOME AND EXPENSE FORM ATTACHED FOR FURTHER INSTRUCTIONS FOR TENANTS AND OPERATORS.										
☐ GROUND LEASE - A LEASE OF VACANT LAND, OR LAND EXCLUSIVE OF THE BUILDING(S) ON IT. INDICATE THE GROUND RENT IN THE SPACE PROVIDE HERE AND IN THE APPROPRIATE SPACE ON THE INCOME AND EXPENSE FORM. PLEASE REFER TO THE INCOME AND EXPENSE FORM ATTACHED FOR FURTHER INSTRUCTIONS FOR TENANTS AND OPERATORS.											
TALEC INCORMATION											
WAS THE PROPERTY ACQUIRED IN AN AR	•	NSACTION WITHIN TH	FIAST 5 YEARS? YES □ N	0 □							
AN ARM'S LENGTH TRANSACTION - IS A LEGAL											
6 INVOLVED IN ANY MANNER WHICH WOULD TAINT		TIME THE EXIST ES INC									
MONTH AND YEAR OF SALE	Pl	JRCHASE PRICE \$									
MAJOR CAPITAL IMPROVEMENTS T	(within last 5 year	ars)									
A CAPITAL IMPROVEMENT IS A PHYSICAL ALTER EXTENSION MADE TO THE REAL PROPERTY WHI				N OR							
IMPROVEMENTS		DATE	COST / LIFE								
.7											
ATTACHMENTS AND CERTIFICATION											
certify, under penalty of perjury, that the information co	ntained within this fo	orm and the attached Incom	ne and Expense Statement is accurate	e and truthful.							
SIGNATURE		NAME(PRINT)	DA								
			DA	· –							

ASSISTED LIVING ASIE, PAGE 2

ASSISTED LIVING INCOME	SECTION	BLOCK	LOT		ASIE-2005 ISTED LIVING				
COMPLETE THIS PORTION IF FILED BY TENANT, LESSEE, OCCUPANT, OPERATOR OR OWNER-OPERATOR ▼									
GROSS OPERATING INCOME									
	•	2004 GROSS RECEIPTS (\$)		2005 GROSS RECEIPTS (\$)					
28 ROOMS									
29 LEASED AREAS	LEASED AREAS								
30 OTHER			\$		\$				
TOTAL ASSISTED LIVING (add	lines 20 thru 20)	6		¢					
TOTAL ASSISTED LIVING (add lines 28 thru 30) \$ \$ COMPLETE THIS PORTION IF FILED BY OWNER AND PROPERTY IS LEASED TO A NON-RELATED PARTY									
GROSS RENTAL INCOME	NUMBER OF UNITS OR SPACES	GROSS SQUARE FEET	NUMBER OF VACANT UNITS	200	5 GROSS INCOME (\$)				
32 LEASED PARKING FACILITIES				\$					
33 STORES				\$					
34 OFFICES				\$					
35 GROUND RENT				\$					
36 OTHER INCOME (DETAIL BELOW)									
37 OWNER OCCUPIED (DETAIL BELOW)				\$					
38 SERVICES				\$					
39 R E TAX ESCALATION				\$					
40 OPERATING ESCALATION				\$					
41 SALE OF UTILITIES				\$					
42 SIGNAGE / BILLBOARD				\$					
43 CELL TOWERS / ANTENNA				\$					
44 OTHER (DETAIL BELOW)				\$					
TOTAL GROSS RENTAL INCC (ADD LINES 32 THRU 44)	OME			\$					
NOTES -									

ASIE-2005 ASSISTED LIVING INCOME & EXPENSE, PAGE 1

	ASSISTED LIVING EXPENSE	ASIE-2005						
EXPENSE ASSISTED LIVING ENTER EXPENSES FOR APPLICABLE ITEMS ONLY								
	THE EXITENSES FOR F	II I LIOAD	LL IILIIIO	ONLI	2004 EXPENSES	2005 EXPENSES		
46	FIXED OR MINIMUM RENT				\$	\$		
47	PERCENTAGE RENT		\$	\$				
48	REAL ESTATE TAXES PAID B	\$	\$					
49	COMMON AREA MAINTENANO	EREST)	\$	\$				
50	MANAGEMENT PAYROLL				\$	\$		
51	OFFICE PAYROLL				\$	\$		
52	BUSINESS PAYROLL				\$	\$		
53	PAYROLL TAX AND BENEFITS	S			\$	\$		
54	FUEL				\$	\$		
55	ELECTRICITY				\$	\$		
56	WATER & SEWER				\$	\$		
57	PROPERTY INSURANCE				\$	\$		
58	PERSONAL INSURANCE				\$	\$		
59	MANAGEMENT (EXCLUDING MANA	GEMENT PAYRO	DLL)		\$	\$		
60	REPAIRS AND MAINTENANCE	TO REAL P	ROPERTY		\$	\$		
61	LEASING COMMISSION				\$	\$		
62	BUSINESS TAX				\$	\$		
63	OFFICE EXPENSE		\$	\$				
64	MISCELLANEOUS CHARGES	\$	\$					
65	TOTAL RENTAL EXPENSES	8			\$	\$		
66	OTHER EXPENSES (DETAIL BELOW)			\$	\$		
67	TOTAL EXPENSE	\$	\$					
NOTES -								

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